# JUN S 2007

### **FORM D**

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

### **FORM D**

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
DESCRIPTION OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076 Expires: November 30, 2008 Estimated average burden hours per form 16.00

SEC USE ONLY							
Prefix	Serial						
DAT	RECEIVED						

CONFORM LIMITED OFFERING EXEMITION	
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Series A Units	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Rule 4(6) ULOE	
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
TINSEL CINEMA, LLC	)
Address of Executive Offices (Number and Street, City, State, Zip Telephone Number ( 07068)	<i>51</i> 0
Code)605 K STREET NE, Suite #2, Washington, D.C. 20002 (202)544-8869	
Address of Principal Business Operations (Number and Street, City, State, Zip   Telephone Number (Including Area Coo	de)
Code)(if different from Executive Offices)	
Brief Description of Business Online video Services	
Type of Business Organization	
☐ corporation ☐ limited partnership, already formed ☐ other (please specify):	
business trust limited partnership, to be formed Limited Liability Company	,
Month Year	
Actual or Estimated Date of Incorporation or Organization: 7 2006 Actual	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: TIUCESSED	R
CN for Canada: FN for other foreign jurisdiction)	V
GENERAL INSTRUCTIONS  JUN 2 8 2007	
THOMOGN	
Federal:  Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 Crail (2017) [13.14]	USC
77d(6).	J.O.O.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicted on the filing of a federal notice.

### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Executive Officer □ Director General and/or Check Box(es) that Apply: ✓ Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) WEIR, CHASE Business or Residence Address (Number and Street, City, State, Zip Code) 605 K STREET NE, Suite #2, Washington, D.C. 20002 Beneficial Owner Executive Officer □ Director General and/or Check Box(es) that Apply: □ Promoter Managing Partner Full Name (Last name first, if individual) SHERVANI, SAAD Business or Residence Address (Number and Street, City, State, Zip Code) 605 K STREET NE, Suite #2, 'Washington, D.C. 20002 Beneficial Owner ☐ Executive Officer ☐ Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) KRISHAN, SHAILY Business or Residence Address (Number and Street, City, State, Zip Code) 302 Sovereign, Kalyaninagar, Pune, Maharashtra, India ■ Beneficial Owner Check Box(es) that Apply: Promoter ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) RAFIQUE, MUHAMMAD

Business or Residence Address (Number and Street, City, State, Zip Code)

☐ Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply:

KHAN, SHAHID

Full Name (Last name first, if individual)

Suite 428, Bldg. 2, EMAAR Business Park, Sheikh Zayed Road, P.O. Box 261702, Dubai, U.A.E.

Suite 428, Bldg. 2, EMAAR Business Park, Sheikh Zayed Road, P.O. Box 261702, Dubai, U.A.E.

Beneficial Owner

Managing Partner

Executive Officer

□ Director

General and/or

Check Box(es) that Apply:	Promoter Beneficial Owner Managing Partner	Executive Officer	Director	General and/or
Full Name (Last name first, if in	idividual)			
INNOVATIVE ENTERTAINM	ENT LIMITED			
Business or Residence Address	(Number and Street, City, State, Zip C	ode)		
Suite 428, Bldg. 2, EMAAR Bu	siness Park, Sheikh Zayed Road, P.O.		•	
Check Box(es) that Apply:	☑ Promoter ☑ Beneficial Owner Managing Partner	Executive Officer	Director	General and/or
Full Name (Last name first, if ir	dividual)			
REMUS, CHRIS				
Business or Residence Address	(Number and Street, City, State, Zip C	ode)		
605 K STREET NE, Suite #2, V	Vashington, D.C. 20002			
(Us	blank sheet, or copy and use addition	al copies of this sheet, as n	ecessary.)	

				B. IN	NFORMA'	TION AB	OUT OFF	ERING					
	-		<del></del>							<del></del>		Yes	No
1. F	las the issue	r sold, or d							-		•••••		$\boxtimes$
						-	n 2, if filin	_					
2. \	What is the r	ninimum in	vestment th	nat will be	accepted fi	rom any in	dividual:		•••••	• • • • • • • • • • • • • • • • • • • •	•••••	n/a Yes	No
3. Г									⊠				
	Enter the inf		-										
C	commission	or similar	rernunerati	on for so	licitation o	f purchase	ers in cont	nection wi	th sales of	f securities	in the		
	offering. If a vith a state of												
	ersons of su												
Full ì	Vame (Last	name first, i	if individua	l)									·
n/a	<u> </u>												
Busin	ess or Resid	lence Addre	ess (Numbe	er and Stree	et, City, Sta	ate, Zip Co	ode)						
37	C A	- 1 D - 1	121					<del> </del>					
Name	e of Associa	ted Broker	or Dealer										
States	s in Which I	erson Liste	d Has Solie	cited or Int	tends to So	licit Purch	asers						
State.		'All States"					All Sta	ates					
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	_	D]
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	_	MO] PA]
[RI]	[SC]		[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[014]	_	PR]
Full 1	Vame (Last	name first,	if individua	ıl)									
Busir	ness or Resid	lence Addre	ess (Numbe	er and Stree	et, City, St	ate, Zip Co	ode)						
Name	e of Associa	ted Broker	or Dealer										<del></del>
	<del>:=</del> .	· · · · · · · · · · · · · · · · · · ·	···										
States	s in Which I Check '	'erson Liste 'All States"				licit Purch	asers	ates					
[AL]	•	[AZ]			[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[]	D]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]		MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WI]		PA] PR]
	Name (Last				. 19.7		[ * * * * ]	[ *** 1 * ]			1 *** **1		,
Busir	ness or Resid	lence Addr	es: (Numbe	er and Stre	et, City, St	ate, Zip Co	ode)				·		·
Name	of Associa	tad Dealton	or Doolor										
ivame	e of Associa	ieu droker	or Dealer										
State	s in Which I	Person Liste	d Has Soli	cited or Int	tends to So	licit Purch	asers						
	(Check '	'All States"	or check i	ndividual S	States)		All Sta		_		_		
[AL]		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	_	D]
[IL] [MT]	(IN)   [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]		MO] PA]
(RI)	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WI]	_	PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

l.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange		
	offering, check this box [ and indicate in the columns below the amounts of the securities		
	offered for exchange and already exchanged.		
		Aggregate	Amount
	Type of Security	Offering Price	Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify) Limited Liability Membership Interest Series A Units	\$3,000,000	\$3,000,000
	Total	\$3,000,000	\$3,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.	, ,	. , ,
2.	Enter the number of accredited and non-accredited investors who have purchased securities in		
۷.	this offering and the aggregate dollar amounts of their purchases. For offerings under Rule		
	504, indicate the number of persons who have purchased securities and the aggregate dollar		
	amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number	Dollar Amoun
		Investors	of Purchases
	Accredited Investors	11	\$3,000,000
	Non-accredited Investors	0	0
	Total (for filings under Rule 504 only)	n/a	n/a
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1		
		Type of	Dollar Amoun
	Type of offering	Security	Sold
	Rule 505	n/a	n/a
	Regulation A	n/a	n/a
	Rule 504	n/a	n/a
	Total	n/a	n/a
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fee		\$
	Printing and Engraving Costs		\$
	Legal Fees	$\boxtimes$	\$10,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	⊠	\$10,000
			•

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Question 1 and total expenses furnished in is the "adjusted gross proceeds to the issue	response to Part C - Question 4.a. This difference		\$2,990,000
used for each of the purposes shown. If the estimate and check the box to the left of equal the adjusted gross proceeds to the in	ne amount for any purpose is not known, furnish an the estimate. The total of the payments listed must		
		Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		<b></b> \$	<b></b> \$
Purchase of real estate		<b>s</b>	<b></b>
Purchase, rental or leasing and installs	ation of machinery and equipment	<b></b> \$	<b>□</b> \$
Construction or leasing of plant build	ngs and facilities	<b></b> \$	<b></b> \$
offering that may be used in exchan	ge for the assets or securities of another issuer	<b></b>	<b></b>
•		□\$	<b>□</b> \$
. •		<u> </u>	<b>□</b> \$2,990,000
<b>-</b> .		\$	<b></b> \$
Column Totals		<b>□</b> \$	⊠\$2,990,000
Total Payments Listed (column totals	added)	⊠\$2	,990,000
	D. FEDERAL SIGNATURE		
following signature constitutes an undertaten request of its staff, the information fur	king by the issuer to furnish to the U.S. Securitie	s and Exchange (	Commission, upon
	Signature has was	Date JUNE _/7, 20	07
ne of Signer (Print or Type)	Title of Signer (Print or Type)		
ASE WEIR	PRESIDENT		
	Question 1 and total expenses furnished in is the "adjusted gross proceeds to the issue Indicate below the amount of the adjusted used for each of the purposes shown. If the estimate and check the box to the left of the equal the adjusted gross proceeds to the inabove.  Salaries and fees	Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."  Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.  Salaries and fees  Purchase of real estate  Purchase, rental or leasing and installation of machinery and equipment  Construction or leasing of plant buildings and facilities  Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger).  Repayment of indebtedness.  Working capital  Other (specify):  Column Totals  Total Payments Listed (column totals added)  D. FEDERAL SIGNATURE  issuer has duly caused this notice to be signed by the undersigned duly authorized person. It following signature constitutes an undertaking by the issuer to furnish to the U.S. Securitie ten request of its staff, the information furnished by the issuer to any non-accredited investor er (Print or Type)  ISEL CINEMA, LLC	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.  Payments to Officers, Directors, & Affiliates  Salaries and fees

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions or such rule?	Yes	No
	See Appendix, Column 5 for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) TINSEL CINEMA, LLC	Signature hase Wei	Date JUNE <u>19</u> , 2007
Name (Print or Type)	Title (Print or Type)	
CHASE WEIR	PRESIDENT	

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

1		2	3			4			5
	to acc inve	nd to sell non- redited estors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount p	Disqualif under State (if yes, a explanat waiver gr (Part C-Item 2)  Disqualif under State (if yes, a explanat waiver gr (Part E-I			
State	Yes	No	Series A Units (\$3,000,000)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK								ļ	
AZ								ļ	
AR									
CA									
со									
СТ									
DE								ļ	
DC		х	Series A Units (\$3,000,000)	3	\$89,322	0	0		х
FL								ļ	
GA									
HI								<u> </u>	
ID					· ·				
IL									
IN								ļ	
IA									
KS									
KY							· · · · · · · · · · · · · · · · · · ·		
LA								ļ	
ME								<u></u>	
MD									
МА	ļ								
MI					· · · · · · · · · · · · · · · · · · ·				
MN									
MS		L. <u>.</u>							į

# APPENDIX

1		2	3			4			5
	to acc inve	d to sell non- redited stors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Series A Units (\$3,000,000)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ									
NE									
NV	_								
NH									,
NJ									
NM									
NY									
NC									
ND									
ОН									
ОК							<u> </u>		
OR									
PA									
RI									
SC					· <u></u>			<u> </u>	,
SD									
TN									
TX									
UT									
VT								<u></u>	
VA								<u></u>	
WA									
wv									
WI	1								
WY									

# APPENDIX

1	to acc inve	d to sell non- redited stors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Series A Units (\$3,000,000)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR						•			
Fo - reign		х	Series A Units (\$3,000,000)	8	\$2,910,678	0	0		х

356795247v3 **356795247v3** 

